



STATE OF ARIZONA
APPLICATION FOR CERTIFICATION
 AS A PARTICIPATING CANDIDATE

Pursuant to Arizona Revised Statutes §§16-947 and 948 and AAC R2-20-104 (D)



☒ Initial Application

☐ Amended Application

FILED 2004-93120

NAME OF CANDIDATE AMANDA AGUIRRE		OFFICE SOUGHT (Include Legislative District, if applicable) LD #24 House/Rep	
ADDRESS (NUMBER & STREET) 1464 S. Howard Dr		CITY Yuma	STATE AZ
MAILING ADDRESS (if different from above)		CITY	STATE AZ
CANDIDATE'S TELEPHONE # (928) 3430611	CANDIDATE'S FAX # [Signature]	CANDIDATE'S E-MAIL ADDRESS AGUIRRE2004@Agl.com	
CANDIDATE'S PARTY AFFILIATION (if any) Democratic			
NAME OF CANDIDATE'S COMMITTEE Committee to Retain Rep. AMANDA AGUIRRE			
COMMITTEE'S ADDRESS 1464 S. Howard		CITY Yuma	STATE AZ
COMMITTEE'S PHONE # (928) 3430611		COMMITTEE'S E-MAIL ADDRESS AGUIRRE2004@Agl.com	
NAME OF DESIGNATED INDIVIDUAL WITH AUTHORITY TO WITHDRAW FUNDS (IF APPLICABLE) (A.R.S. §16-948) Gerald W. Hunt			
DESIGNATED INDIVIDUAL'S ADDRESS 330 W 27th St.		CITY Yuma	STATE AZ
DESIGNATED INDIVIDUAL'S TELEPHONE # 928 783 0101	DESIGNATED INDIVIDUAL'S FAX # 928 783 2788	DESIGNATED INDIVIDUAL'S E-MAIL ADDRESS gwhunt@hkmhlaw.com	
LIST THE NAME OF THE FINANCIAL INSTITUTION FROM WHICH THE CANDIDATE AND THE DESIGNATED INDIVIDUAL WILL CONDUCT ALL FINANCIAL ACTIVITY FOR THE CANDIDATE'S CAMPAIGN COMMITTEE (do not list account number). (A.R.S. §16-948(A)). Bank One			

DESIGNATED CANDIDATE'S STATEMENT (if applicable) (A.R.S. §16-948(B)): I hereby designate **Gerald W. Hunt** as my duly authorized Designated Individual, with the authority to withdraw funds and make expenditures from my campaign account on my behalf.

Date: **1/14/04**

Candidate's signature: **[Signature]**

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 JAN 16 AM 8:56
 CLERK OF STATE